

APPLICATION DATA SHEET

APPLICATION INFORMATION

Application Type::	REGULAR
Subject Matter::	UTILITY
CD-ROM or CD-R?::	NONE
Title::	DERMATOLOGICAL PREPARATIONS
Attorney Docket Number::	246344US0DIV
Total Drawing Sheets::	0
Small Entity?::	NO
Petition Included?::	NO

INVENTOR INFORMATION

Applicant Authority Type::	INVENTOR
Primary Citizenship Country::	JAPAN
Status::	FULL CAPACITY
Given Name::	Masahide
Family Name::	HOSHINO
City of Residence::	Tochigi
State or Province of Residence::	Haga-gun
Country of Residence::	JAPAN
Street of Mailing Address::	c/o KAO CORPORATION RESEARCH LABORATORIES, 2606, Akabane, Ichikaimachi
City of Mailing Address::	Tochigi
State or Province of Mailing Address::	Haga-gun
Country of Mailing Address::	JAPAN
Postal or Zip Code of Mailing Address::	321-3497

Applicant Authority Type::	INVENTOR
Primary Citizenship Country::	JAPAN
Status::	FULL CAPACITY
Given Name::	Yoshiya
Family Name::	SUGAI
City of Residence::	Tochigi
State or Province of Residence::	Haga-gun
Country of Residence::	JAPAN
Street of Mailing Address::	c/o KAO CORPORATION RESEARCH LABORATORIES, 2606, Akabane, Ichikaimachi
City of Mailing Address::	Tochigi
State or Province of Mailing Address::	Haga-gun
Country of Mailing Address::	JAPAN
Postal or Zip Code of Mailing Address::	321-3497
Applicant Authority Type::	INVENTOR
Primary Citizenship Country::	JAPAN
Status::	FULL CAPACITY
Given Name::	Akiyo
Family Name::	KAMEYAMA
City of Residence::	Tochigi
State or Province of Residence::	Haga-gun
Country of Residence::	JAPAN
Street of Mailing Address::	c/o KAO CORPORATION RESEARCH LABORATORIES, 2606, Akabane, Ichikaimachi
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Postal or Zip Code of Mailing Address::	321-3497

Applicant Authority Type::	INVENTOR
Primary Citizenship Country::	JAPAN
Status::	FULL CAPACITY
Given Name::	Hiroaki
Family Name::	SAITO
City of Residence::	Tochigi
State or Province of Residence::	Haga-gun
Country of Residence::	JAPAN
Street of Mailing Address::	c/o KAO CORPORATION RESEARCH LABORATORIES, 2606, Akabane, Ichikaimachi
City of Mailing Address::	Tochigi
State or Province of Mailing Address::	Haga-gun
Country of Mailing Address::	JAPAN
Postal or Zip Code of Mailing Address::	321-3497
Applicant Authority Type::	INVENTOR
Primary Citizenship Country::	JAPAN
Status::	FULL CAPACITY
Given Name::	Yoshinori
Family Name::	NISHIZAWA
City of Residence::	Tochigi
State or Province of Residence::	Haga-gun
Country of Residence::	JAPAN
Street of Mailing Address::	c/o KAO CORPORATION RESEARCH LABORATORIES, 2606, Akabane, Ichikaimachi
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Applicant Authority Type:: INVENTOR
 Primary Citizenship Country:: JAPAN
 Status:: FULL CAPACITY
 Given Name:: Yutaka
 Family Name:: TAKAGI
 City of Residence:: Tochigi
 State or Province of Residence:: Haga-gun
 Country of Residence:: JAPAN
 Street of Mailing Address:: c/o KAO CORPORATION RESEARCH
 LABORATORIES, 2606, Akabane,
 Ichikaimachi
 City of Mailing Address:: Tochigi
 State or Province of Mailing Address:: Haga-gun
 Country of Mailing Address:: JAPAN
 Postal or Zip Code of Mailing Address:: 321-3497

CORRESPONDENCE INFORMATION

Correspondence Customer Number:: 22850

REPRESENTATIVE INFORMATION

Representative Customer Number:: 22850

DOMESTIC PRIORITY INFORMATION

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Division of	09/926,270	10/04/01
This Application	National Stage of	PCT/JP00/01383	03/08/00

FOREIGN PRIORITY INFORMATION

Application Number:	Country::	Filing Date::	Priority Claimed::
11-101076	Japan	04/08/99	YES

ASSIGNMENT INFORMATION

Assignee Name:: KAO CORPORATION
 Street of Mailing Address:: 14-10, Nihonbashi Kayaba-cho
 1-chome, Chuo-ku
 City of Mailing Address:: Tokyo
 Country of Mailing Address:: Japan

Postal or Zip Code of Mailing Address:: 103-8210